

HEALTH PROMOTION & PREVENTION INITIATIVES

NEWSLETTER



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Initiative Spotlight



Knee and Ankle Rehabilitation: SMART Program

Description: The Sports Medicine and Rehabilitation Therapy (SMART) Program uses innovative methods in physical training to return Soldiers to peak performance. This functional knee and ankle rehabilitation program simulates MOS-specific tasks (like equipment carrying) and uses realistic training environments (like uneven terrain and sand) to address the physical and mental aspects of Soldiering.

Outcomes/data collected: Measures on the knee and ankle index show a marked improvement from pre- to post-enrollment scores. Every Soldier who has entered into the program has been retained in the Army. All Soldiers who completed the program have been returned to duty and a deployable status, and have passed the 2 mile run for the Army Physical Fitness Test.

Effect on readiness/deployability: Each unit must be confident of all the members within that unit, especially as they prepare to go into theatre. Retaining current unit members is always preferable to replacing a Soldier. The SMART program enables Soldiers to be rehabilitated and returned to their units in order to maintain unit integrity.

Ideas from the Field

Advice from HPPI FY04 Project POCs (part 2)

- You need data to document your program effectiveness. Utilization Management may already be collecting data you can use.
- Use data to brief Commanders every 4 to 6 months to show the benefits of your program. This will help sustain Command support.
- Provide in-service training to MTF staff. *They* get continuing education and *you* get to emphasize the importance of your program.

Resources



Prevention makes common “cents”

<http://aspe.hhs.gov/health/prevention/>

Recent research on the prevalence of overweight, [diabetes](#), cardiovascular disease, asthma, and tobacco use; cost information and case studies are included.

Program Pointers

Business Case Analysis: Return on Investment

Commanders want to know that dollars spent are producing benefits. You can calculate the Return on Investment (ROI) for your program to prove that a program is worth the money invested. It is often challenging to calculate the ROI for a health promotion program. However, the steps below can help you get started.

Step 1: Determine what costs are needed to implement the program. Include items that cost dollars: supplies, equipment, educational materials, speaker fees, etc. Don't include salaries unless a person is specifically hired for that program.

Step 2: Translate measurable program objectives into dollars. Think short term **and** think like a Commander. Tie the objectives to outcomes that have a defined dollar value. For example:

- decreased sick time
- decreased lost duty time
- decreased provider visits
- decreased emergency room visits
- decreased days on profile

Finally, divide the total dollar benefits from Step 2 into the total costs of Step 1. This will provide you with an ROI such as 3.1:1 (that is: \$3.10 gained for every \$1 spent).

This very simplistic example will get you started thinking about ROI and the process of business case analysis (BCA). A sample BCA can be found at:

<http://chppm-www.apgea.army.mil/dhpw/Population/HPPI.aspx>.

Also refer to An Ounce of Prevention... What Are the Returns? at <http://www.cdc.gov/epo/prevent.htm>.

Don't Reinvent the Wheel!

May – Prevent Eye Injuries

Vision is precious. For information on avoiding eye injuries, visit USACHPPM's TriService Vision Conservation and Readiness Program. The site has information cards on the Ten Commandments of Eye Safety, Ultraviolet Radiation Hazards, Chemical Splash First Aid, and Enhancing Computer Workstation Comfort. For more information visit <http://dodvision.com/>.



HPPI News & FAQs

HPPI FY05 funded projects have received their funding awards. Initial conference calls have been held with all FY05 POCs. Some of the deliverables for the HPPI portfolio from FY05 projects will include: spiritual health/stress management resources; toolkits and information resources for: step/walking programs, pediatric obesity, sports medicine and rehabilitation therapy (see spotlight in this newsletter); caries prevention intervention data; and weight management tools with direct line and readiness implications.

For more information about HPPI, or to see past issues of the HPPI newsletter, visit <http://chppm-www.apgea.army.mil/dhpw/Population/HPPI.aspx>.

To subscribe to this newsletter or send comments/suggestions send email to: Marcella.Birk@apg.amedd.army.mil or call DHPW at (410) 436-4656, DSN 584-4656.

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